

# **VSH Employees' Work Group**

**May 8, 2006      2:00 – 4:00**

## **Minutes**

**Next meeting: May 23, 9:00 to 11:00, Secretary's Conference Room**

Present: John Berard, Dena Weidman, Gail Rushford, Laura DeForge, Conor Casey, Goldie Watson, Keith Goslant, Terry Rowe, Annie Noonan (by phone),

Absent: John O'Brien

Futures Staff: Beth Tanzman and Judy Rosenstreich

### Agenda

Introductions

Minutes

New Business

Motion on Participation

Review proposed descriptions of options

→ public comment

Identify any other possible models

Pros and cons

→ public comment

Wrap Up:      Agreements  
                 Planning for next meeting

### Introductions

Gail Rushford convened the meeting at 2:10 PM. The group welcomed John Berard

### Minutes

→ Keith moved / Conor seconded to approve the minutes of April 28, 2006, as amended. All were in favor.

### Motion on Participation

→ Conor moved / Annie seconded that the voting membership of the VSH Employees' Futures Work Group will be based on its original design to maintain equal representation of labor and management when the group is developing its recommendations with the understanding that Advisory Committee members are otherwise welcome to attend and to participate in discussion. All were in favor.

## New Business

Conor distributed a survey that he did of state hospital workforces in New England.

Review proposed descriptions of options

Gail reviewed Operating Assumptions that she circulated to the group. Discussion focused on the staffing models that Gail had fleshed out since the last meeting and clarification of the variations in privatized and public/private partnership staffing models. Currently, VSH operates as a type of public/private partnership. In the case of Vermont's community mental health system, the workforce and management are privatized.

Gail and Judy will work on further clarification of the staffing models for discussion at the next meeting.

## Pros and Cons

Once the range of staffing models are clear, the work group will evaluate the pros and cons of each option. Participants began to identify a list of criteria that could include:

- Ongoing operating costs
- The degree to which the option retains the existing VSH workforce (including staffing model)
- Opportunities to sustain and improve quality of care
- The degree to which the option facilitates recruitment of needed staff
- How responsive to changes in psychiatric care over time is the option
- Degree to which the option allows the state to control costs over time
- (For public/private partnership models) how feasible would it be for the state to reassume staffing responsibility if the partner pulls out?
- Degree to which the model promotes open access of program by advocates.

## FUTURE MEETINGS

Judy will send out dates for two meetings in June.

SUBMITTED BY: Judy Rosenstreich

